PART B - FEE(S) TRANSMITTAL

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	Varian Inc. Legal Department 3120 Hansen Way D-102 Palo Alto, CA 94304					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.				
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	APPLICATION NO.	FILING DATE	FILING DATE FI		IRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
	10/689,169	10/689,169			Anthony G. Liepert			03-15 US 2706		
	APPLN. TYPE	COMPACT SCROLL PUMP SMALL ENTITY	ISSUE F	re T	DI	PLICATION FEE	TOTAL FE	E(G) DIVE	DATE DVI	
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	TRIEU, THERESA		3748			418-055100				
	CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47: Rev 03-02 or more recent) attached. Use of a Customer 2 to 1.5 cm.					For printing on the patent front page, list) the names of up to 3 registered patent attorneys agents OR, alternatively,) the name of a single firm (having as a member a gistered attorney or agent) and the names of up to registered patent attorneys or agents. If no name is sted, no name will be printed.				
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
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P	lease check the appropriate	e assignee category or catego	ries (will not be pr	inted on the pa	itent) :	☐ Individual ☐ C	orporation or o	ther private gr	oup entity Government	
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